06-04-05

## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable

Mail Stop ISSUE FEE **Commissioner for Patents** 

P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting in HISUL Fact and SORLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance or so and hot legical of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (4) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee artifactions. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of add Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying upers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. JUN 0 7 2005 03/22/2005 7590 TRADEN Certificate of Mailing or Transmission AKKIKIK XXIXIXXX I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. Holler Ehranen White & We Anityle (Depositor's name) <u>Mena</u> Heller Ehrman LLP Menlo Park; 2005 275 Middlefield Rd., June (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 06/18/1999 25658-0002 09/336.392 TERRENCE R. GREEN 7579 TITLE OF INVENTION: MEDICAL DEVICE HAVING ANTI-INFECTIVE AND CONTRACEPTIVE PROPERTIES SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE APPLN, TYPE YES \$700 \$0 \$700 06/22/2005 nonprovisional EXAMINER ART UNIT CLASS-SUBCLASS CHOI, FRANK I 1616 424-667000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Heller Ehrman LLP (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

06/10/2005 MBERHE1 00000010 081641 09336392 (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Portland, OR & H. W. OXIBIO, INC. Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🙀 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: XXIssue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. 08-1641 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08 100 (enclose an extra copy of this form). Advance Order - # of Copies \_\_\_ 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). XXa. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the sque Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in

interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name \_

Paul Davis

Date June 7, 2005

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.